



Together We Thrive

Austin/Travis County Community Health Plan

Community Health Improvement Planning for Austin/Travis County

Presentation to: Public Health and Human Services Committee Special Called Meeting

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PRESENTATION OBJECTIVES



- ✧ **Review key finding from Community Health Assessment (CHA), Community Health Improvement Plan (CHIP) and Implementation of CHIP (I-CHIP) process and progress**
- ✧ **Discuss strategies selected for 1st year of implementation**
- ✧ **Review Next Steps**

COMMUNITY HEALTH IMPROVEMENT PROCESS



January – June 2012

- ✓ Community Health Assessment (CHA) is conducted to identify the health related needs and strengths of Austin/Travis County.

July – December 2012

- ✓ Community Health Improvement Plan (CHIP) is drafted. CHIP is a long-term, systematic effort to address public health problems and is based on CHA results.

January - June 2013

- ✓ Developed Implementation for CHIP (I-CHIP) Year 1 Action Plan, a clear sequence of steps to achieve strategies

CHIP DEVELOPMENT & ENGAGEMENT



- ★ **Steering Committee**
- ★ **Core Coordinating Committee**
- ★ **CHA Community Forums, Focus Groups, and Key Interviews**
- ★ **CHIP Workgroups and Planning Summit**

VISION, MISSION AND SHARED VALUES



Vision: Healthy People are the Foundation of our Thriving Community

Mission: Our community – individuals and organizations (public, private, non-profit) – works together to create a healthy and sustainable Austin/Travis County

Shared Values: Diverse and inclusive, respectful, health promoting, efficient and results oriented, objective, and shared accountability and ownership

CHIP HEALTH PRIORITIES



1. **Chronic Disease** – focus on **Obesity**
 2. **Built Environment** – focus on **Access to Healthy Foods**
 3. **Built Environment** – focus on **Transportation**
 4. **Access to Primary Care and Mental Health/ Behavioral Health Services** – focus on **Navigating the Healthcare System**
- ✓ Cross-cutting issue: health education/health literacy

CHRONIC DISEASE



Goal 1: **Reduce burden of chronic disease caused by obesity among Austin/Travis County residents.**

Objective: By June 2016, increase by 5% the percentage of adults and children in Travis County who meet or exceed physical activity guidelines for health.

Objective: By June 2016, increase the number of Travis County workplaces that have family supportive breastfeeding by 5%.

Objective: By June 2016, reduce the percentage of children and adults who consume sugar sweetened beverages by 5%.

ACCESS TO HEALTHY FOODS



Goal 2: **All in our community have reasonable access to affordable quality nutritious food.**

Objective: By June 2016, increase by 50% access to and participation of eligible people in food assistance programs that increase access to healthy food.

Objective: By June 2016, ensure that 2 new distribution and production points for healthy foods are available and accessible in each of the high need areas.

Objective: By June 2016, all local municipalities will establish healthy food zone ordinance around schools, municipal parks, childcare centers, libraries and recreation centers.

TRANSPORTATION



Goal 3: **Local and regional stakeholders will collaboratively increase accessibility to community resources via safe, active transportation.**

Objective: By June 2016, increase Travis County active transportation commute mode share by 5%.

Objective: By June 2016, our community through its local authorities will approve a comprehensive funding plan for implementation of the active transportation master plans (i.e. sidewalks, bike, trails, transit, etc.).

Objective: By June 2016, the City of Austin and Travis County will require and incentivize active transportation connections for all new development outside of the activity centers identified in the Capital Area Metropolitan Planning Organization's (CAMPO) 2035 Plan.

ACCESS TO PRIMARY CARE AND MENTAL/BEHAVIORAL HEALTH SERVICES



Goal 4: **Expand access to high-quality behaviorally integrated patient centered medical homes for all persons.**

Objective: June 2016, increase the adoption of patient-centered strategies within the safety net.

Objective: By June 2016, expand by 10% the number of entities serving safety net populations that are utilizing health IT systems.

Objective: By June 2016, increase the adoption of coordination strategies within the safety net.

Objective: By June 2016, expand comprehensive care strategies within the safety net.

NEXT STEPS



- ★ **Presentation to the City Council and Commissioners Court upon the Steering Committee's approval**
- ★ **Community-wide and targeted presentation**
- ★ **Ongoing presentations to stakeholders**

DISCUSSION AND QUESTIONS

For more information, contact:

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